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**DENTAL HEALTH FACT SHEET**

**ORAL CANCER**

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This fact sheet deals with cancer of the oral cavity (mouth) and the oropharynx (the part of the throat at the back of the mouth). The oral cavity includes many parts: the lips; the lining inside the lips and cheeks, called the buccal mucosa; the teeth; the bottom (floor) of the mouth under the tongue; the front two-thirds of the tongue; the bony top of the mouth (hard palate); the gums; and the small area behind the wisdom teeth. The oropharynx includes the back one-third of the tongue, the soft palate, the tonsils, and the part of the throat behind the mouth.

***Symptoms***

Oral cancer usually occurs in people over the age of 45 but can develop at any age. These are some symptoms to watch for:

- A sore on the lip or in the mouth that does not heal;
- A lump on the lip or in the mouth or throat;
- A white or red patch on the gums, tongue, or lining of the mouth;
- Unusual bleeding, pain, or numbness in the mouth;
- A sore throat that does not go away, or a feeling that something is caught in the throat;
- Difficulty or pain with chewing or swallowing;
- Swelling of the jaw that causes dentures to fit poorly or become uncomfortable;
- A change in the voice; and/or
- Pain in the ear.

These symptoms may be caused by cancer or by other, less serious problems. It is important to see a dentist or physician about any symptoms like these, so that the problem can be diagnosed and treated as early as possible.

***Causes and Prevention***

Two known causes of oral cancer are tobacco and alcohol use. Tobacco use – smoking cigarettes, cigars, or pipes; chewing tobacco; or dipping snuff – accounts for 80 to 90 percent of oral cancers. A number of studies have shown that cigar and pipe smokers have the same risk as cigarette smokers. Studies indicate that smokeless tobacco users are at particular risk of developing oral cancer. For long-time users, the risk is much greater, making the use of snuff or chewing tobacco among young people a special concern. People who stop using tobacco – even after many years of use – can greatly reduce their risk of oral cancer.

Chronic and/or heavy use of alcohol also increases the risk of oral cancer, even for people who do not use tobacco. However, people who use both alcohol and tobacco have an especially high risk of oral cancer.

## ***Deadly to Ignore***

Oral cancer accounts for two to four percent of all cancers diagnosed annually in the United States, but relative survival rates are among the lowest of major cancers. Only one-half the number of persons diagnosed with oral cancer are alive five years after the diagnosis. In contrast to other cancers (e.g., breast, colorectal, and prostate cancers) the overall U.S. survival rate from oral and pharyngeal cancer has not improved during the past 16 years.

Survival rates for oral cancer in minorities have decreased.

Oral cancer today occurs twice as often in males as in females. This is considerably different from the 5:1 male to female ratio of forty years ago. Increased tobacco use among women is the main reason for the change in cancer rates compared with rates in the 1950s. Age is also a factor – 95 percent of oral cancers occur among persons over the age of 40 and 60 being the average age at diagnosis.

## ***Early Detection***

Dentists and primary care physicians have the opportunity, during regular checkups, to recognize abnormal tissue changes and to detect cancer at an early, curable stage. With early detection, the majority of deaths could be prevented. A head and neck examination should be a routine part of your dental or medical visit.

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